



CITY OF CLERMONT SUMMARY OF EMPLOYEE BENEFITS JANUARY 1, 2015

1. **GROUP MEDICAL INSURANCE**

Group Medical Insurance (Health/Dental) is available for full-time employees and their eligible dependents. Employees are eligible for this coverage on the first day of the month following 60 days of full-time employment. Premiums are paid by the City and the employee through payroll deduction. Employees have the option of selecting a Health Insurance High Deductible Plan with a Health Reimbursement Arrangement Account. This alternative plan provides for higher annual deductibles and out of pocket costs with reduced premiums. The premium schedules for both plans are attached.

2. **GROUP TERM LIFE INSURANCE**

Group Term Life Insurance is provided at no cost to employees for the value of one and one-half times their annual salary. *(Benefit amounts which exceed \$50,000 are taxable to the employee based on IRS regulations.)* Employees are eligible for this coverage on the first day of the month following 60 days of full-time employment.

3. **SUPPLEMENTAL GROUP TERM LIFE INSURANCE**

Full-time employees may purchase additional Supplemental Group Term Life Insurance for themselves and/or eligible dependents. Employees are eligible for this coverage on the first day of the month following 60 days of full-time employment. The cost of this insurance is based on the amount of coverage selected and the age of the insured individual(s).

4. **VISION CARE INSURANCE**

Full-time employees may purchase Vision Care Insurance for themselves and eligible dependents. Employees are eligible for this coverage on the first day of the month following 60 days of full-time employment.

5. **DISABILITY INSURANCE**

Full-time employees may purchase short-term and/or long-term Disability Insurance to protect themselves in the event of loss of income due to a disabling illness or injury. Employees are eligible for this coverage on the first day of the month following 60 days of full-time employment. The cost of this insurance is based on the age and income of the employee.

6. **CRITICAL ILLNESS INSURANCE**

Full-time employees may purchase Critical Illness Insurance for themselves and/or their spouses. New employees are eligible for this coverage on the first day of the month following 60 days of full-time employment.

7. **CANCER INSURANCE**

Full-time employees may purchase Cancer Insurance for themselves and their spouses. Employees are eligible for this coverage on the first day of the month following 60 days of fulltime employment.

8. **GROUP HOSPITAL INDEMNITY INSURANCE**

Full-time employees may purchase Group Hospital Indemnity Insurance for themselves and eligible dependents. New employees are eligible for this coverage on the first day of the month following 60 days of full-time employment.

9. **GROUP ACCIDENT INSURANCE**
Full-time employees may purchase Group Accident Insurance for themselves and eligible dependents. New employees are eligible for this coverage on the first day of the month following 60 days of full-time employment.
10. **FLEXIBLE SPENDING ACCOUNT**
Full-time employees may choose to contribute to a Flexible Spending Account which will allow them to be reimbursed for out-of-pocket medical expenses pertaining to themselves and eligible dependents. Employees are eligible to contribute to this account effective January 1st after the completion of one year of full-time employment with the City.
11. **EMPLOYEE ASSISTANCE PROGRAM**
The Employee Assistance Program helps employees resolve personal and work problems through professional assistance. There is no charge to the employee for this service and it is available immediately.
12. **CAFETERIA (SECTION 125) PLAN**
The City maintains a Cafeteria (Section 125) Plan in accordance with Internal Revenue Service regulations, which allows employees to pay for specific types of voluntary insurance coverages and out-of-pocket medical care expenses with pre-tax wages. As a result, taxable wages are reduced and therefore, employees pay less Federal Income and Social Security Taxes. The specific types of payroll deductions which qualify for this are as follows:
- Health Insurance
 - Dental Insurance
 - Supplemental Group Term Life Insurance
 - Vision Care Insurance
 - Cancer Insurance
 - Group Hospital Indemnity Insurance
 - Group Accident Insurance
 - Medical Care Reimbursement Accounts
13. **PENSION PLANS**
All full-time employees are covered by a City funded pension plan. The City contributes an amount equal to ten (10%) percent of General Employees' salaries to a Defined Contribution Plan. The City contributions to the Police Officers' and Firefighters' Defined Benefit Pension Plans are pursuant to an annual actuarial study. Employee contributions are not required for General Employees; however, Police Officers are required to contribute three (3%) of their wages and Firefighters are required to contribute one (1%) percent of their wages. Retirement ages, vesting schedules and benefit amounts vary based on the plan.
14. **DEFERRED COMPENSATION (SECTION 457) PLAN**
The City maintains a Deferred Compensation (Section 457) Plan in accordance with Internal Revenue Service guidelines, which allows employees to save for their retirement with partially exempt taxable wages. Wages subject to Federal Income Taxes are reduced by the amount of the deferred compensation deduction; therefore, employees pay less Federal Income Taxes. The amount of the maximum annual deduction is set by the Internal Revenue Service.
15. **CREDIT UNION AND BANKING SERVICES**
The City maintains a relationship with Fifth Third Bank and also local Credit Unions. If you have direct deposit you may qualify for free services.

Cigna Medical
Employee Contributions (Bi-weekly payroll deductions)

	<i>Employee Only</i>		<i>Employee + Spouse</i>		<i>Employee + Children</i>		<i>Employee + Family</i>	
	<i>City Share</i>	<i>EE Share</i>	<i>City Share</i>	<i>EE Share</i>	<i>City share</i>	<i>EE Share</i>	<i>City share</i>	<i>EE Share</i>
<i>Base Plan OAP</i>	\$352.94	\$16.77	\$435.48	\$116.48	\$425.05	\$108.58	\$482.93	\$159.32
<i>High Deductible Plan w/HRA</i>	\$264.70	\$10.89	\$326.61	\$60.75	\$318.78	\$56.80	\$362.19	\$82.17
<i>Surcharge Tobacco User</i>		\$36.98		\$55.21		\$53.37		\$64.23
<i>Surcharge Non-Wellness Participant</i>		\$5.00		\$5.00		\$5.00		\$5.00

Cigna Dental
Employee Contributions (Bi-weekly payroll deductions)

	<i>Employee Only</i>		<i>Employee + Spouse</i>		<i>Employee + Children</i>		<i>Employee + Family</i>	
	<i>City Share</i>	<i>EE Share</i>	<i>City Share</i>	<i>EE Share</i>	<i>City Share</i>	<i>EE Share</i>	<i>City Share</i>	<i>EE Share</i>
Dental PPO	\$27.69	\$0	\$27.69	\$7.33	\$27.69	\$6.49	\$27.69	\$14.38

Humana Vision
Employee Contributions (Bi-weekly payroll deductions)

Voluntary Vision	Employee	Employee & Family
	\$3.67	\$9.60